

BARBARA K. CEGAVSKE Secretary of State Elections Division 101 North Carson Street, Suite 3 Carson City, Nevada 89701-3714 Phone: (775) 684-5705

Fax: (775) 684-5718 Website: www.nvsos.gov

State of Nevada Committee for Political Action (PAC)

Registration Form
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JAN 1 5 2016 PM

SECRETARY OF STATE ELECTIONS DIVISION

Annual (Due on or before January 15th of each year) Amended Registration: Change Officers Check all that apply Change Name Other: Name of Committee: The Atkins North America Holdings Corporation PAC Mailing Address: 4030 W. Boy Scout Blvd., Suite 700	g Passage or Defeat of a Ballot Queen; NRS 294A.230(4)(b)) Change Registered Agen Previous Name of PAC Campa ity	Telephone: 248-371-7269 FL 33607 State Zip Code
Amended Registration: Change Officers Check all that apply Change Name Other: Name of Committee: The Atkins North America Holdings Corporation PAC Mailing Address: 4030 W. Boy Scout Blvd., Suite 700 Street Name, Number PAC Active Email Address: jrhill@comerica.com PURPOSE: Briefly state the purpose for which the PA Political Contributions to State and Local candidates for Pu	Change Registered Agen Previous Name of PAC Campa ity AC was organized.	Telephone: 248-371-7269 FL 33607 State Zip Code
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Name of Committee: The Atkins North America Holdings Corporation PAC Mailing Address: 4030 W. Boy Scout Blvd., Suite 700 Street Name, Number C PAC Active Email Address: jrhill@comerica.com PURPOSE: Briefly state the purpose for which the PAC Political Contributions to State and Local candidates for Pu	AC was organized.	248-371-7269 FL 33607 State Zip Code
The Atkins North America Holdings Corporation PAC Mailing Address: 4030 W. Boy Scout Blvd., Suite 700 Street Name, Number PAC Active Email Address: jrhill@comerica.com PURPOSE: Briefly state the purpose for which the PAP Political Contributions to State and Local candidates for Pu	AC was organized.	248-371-7269 FL 33607 State Zip Code
Mailing Address: 4030 W. Boy Scout Blvd., Suite 700 Street Name, Number PAC Active Email Address: jrhill@comerica.com PURPOSE: Briefly state the purpose for which the PAP Political Contributions to State and Local candidates for Pu	AC was organized.	FL 33607 State Zip Code
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Political Contributions to State and Local candidates for Pu		o that of The Atkins North
REGISTERED AGENT: pursuant to NRS 294A.240, eagent, as provided in NRS 14.020, who must be a national state of the state o		ate of Nevada.
Name of Registered Agent:		Telephone:
Corporate Creations Network, Inc.		804-672-9100
Physical Address:		
	as Vegas	NV 89123
Street Name, Number C	ity	State Zip Code
REGISTERED AGENT ACCEPTANCE: I hereby accommittee for Political Action, Surem Vadney, Special :	ept appointment as Registered Ag Secretary Date:	gent for the above-named

EL400 Revised 11-5-15



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State of Nevada

Committee for Political Action (PAC)

Registration Form

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OFFICERS: List the name, title, address and necessary).	telephone number of each o	fficer (attach additional pages if
Officer Name and Title:		Telephone:
David D. Quinn, Sr., Treasurer Mailing Address:		617-423-5548
55 Summer Street, 3rd Floor Street Name, Number	Boston City	MA 02110 State Zip Code
Officer Name and Title:		Telephone:
Michael Adams, Assistant Treasurer Mailing Address:		813-282-7275
4030 W. Boy Scout Blvd Suite 700 Street Name, Number	Tampa City	FL 33607 State Zip Code
Officer Name and Title:		Telephone:
L. Joe Boyer, Chairman Mailing Address:		512-327-6840
6504 Bridge Point Parkway, Suite 200 Street Name, Number	Austin City	TX 78730 State Zip Code
Officer Name and Title:		Telephone:
C. Ernest Edgar, IV, General Counsel Mailing Address:		813-282-7275
4030 W. Boy Scout Blvd., Suite 700 Street Name, Number	Tampa City	FL 33607 State Zip Code
AFFILIATIONS: If the PAC is affiliated with a of each organization (please attach additional		e name, address and telephone number
Name of Organization:		Telephone:
The Atkins North America Holdings Corporation Mailing Address:		813-282-7275
4030 W. Boy Scout Blvd., Suite 700 Street Name, Number	Tampa City	FL 33607 State Zip Code
Name of Organization:		Telephone:
Mailing Address:		
Street Name, Number	City	State Zip Code
Name of Organization:	City	State Zip Code Telephone :
		relephone.
Mailing Address:		
Street Name, Number	City	State Zip Code
	inted Name: David D. Ouinn, Sr.	Date: Telephone:

EL400

Revised: 11-5-15

Signature of Representative of Group